

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003163

FILED  
Jun 21, 2007  
Secretary of State

Entity Name: LIVING WATERS COMMUNITY CHURCH/MISSION INCORPORATED

**Current Principal Place of Business:**

3911 VICTORIA LANDING DR NORTH  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 9419  
JACKSONVILLE, FL 322080419

**New Mailing Address:**

3911 VICTORIA LANDING DRIVE NORTH  
JACKSONVILLE, FL 322080419

FEI Number: 59-3590204      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JENNINGS, LORENZO  
P.O. BOX 9419 EDGEWOOD AVENUE  
JACKSONVILLE, FL 32208 US

**Name and Address of New Registered Agent:**

JENNINGS, LORENZO  
3911 VICTORIA LANDING DRIVE NORTH  
JACKSONVILLE, FL 32208 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

06/21/2007

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: JENNINGS, LORENZO  
Address: P.OBOX 9419 EDGEWOOD AVENUE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: DST ( ) Delete  
Name: JENNINGS, TERI L  
Address: P.O. BOX 9419 EDGEWOOD AVENUE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: DV ( ) Delete  
Name: GRIFFEN, ETHEL  
Address: 1111 W 25TH ST  
City-St-Zip: JACKSONVILLE, FL 32209

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORENZO JENNINGS

PRES

06/21/2007

Electronic Signature of Signing Officer or Director

Date